

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | N | 32 | 4/30 |
| FORMALITY REVIEW | HL | 1079 | 05/09/01 |
| RESPONSE FORMALITY REVIEW | T2 | 947 | 10/08/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 ✓ | Ready |
| 2 ✓ | |
| 3 ✓ | |
| 4 ✓ | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)